



CANDIDATE CERTIFICATION

(8) By initialing, I acknowledge that I have attached a copy of the CAN-12 statement of economic interests, file stamped by the office of the appropriate circuit court clerk, or a receipt or photocopy of a receipt showing that this statement of economic interest has been filed.

(initial here) MS

(9) By initialing, I acknowledge that I might be required to file a surety bond before serving in office. (initial here) MS

(10) By initialing, I acknowledge that I might be required to complete training or have attained certification related to service in office. (initial here) MS

(11) By initialing, I acknowledge that I am aware of the provisions of IC 3-9 regarding campaign finance and the reporting of campaign finance contributions and expenditures, and agree to comply with the provision of IC 3-9. (initial here) MS

(12) I have been a candidate for state or local office in Indiana in a previous primary election:  Yes  No (Check one)  
(If the answer to this question is no, skip paragraph 13 and proceed to paragraph 14.)

(13) I have filed all reports required by IC 3-9-5-10 for all previous candidacies:  Yes  No (Check one)

(14) (This paragraph applies to a candidate for a local office if the local office receives compensation of at least \$5,000 per year, or to a local office if the local office receives compensation of less than \$5,000 but the candidate raises or spends more than \$500.) I have filed a campaign finance statement of organization for my principal candidate's committee with the appropriate county election board OR I am aware that I may be required to file the campaign finance statement of organization not later than noon, seven (7) days after the final date to file this declaration of candidacy. (initial here) MS

I certify that the information in this Declaration of Candidacy is true and complete, and that I meet the specific requirements of this office.

Matthew Greco 2 / 4 / 2019 (765) 4349896 (765) 4349896  
Signature Date Signed (MM/DD/YY) Telephone (Day) Telephone (Evening)

OPTIONAL INFORMATION: Candidate e-mail address: mattgreco@gmail.com Campaign website: \_\_\_\_\_

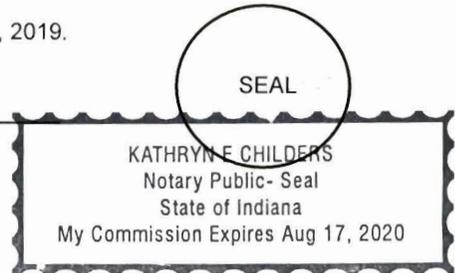
STATE OF Indiana )  
COUNTY OF Howard )

Subscribed and sworn to before me this 4th day of February, 2019.

Kathryn E. Childers  
Notary Public or Other Official Administering Oath under IC 33-42-9-1

My Commission expires (applies only to Notary Public): 8/17/2020

County of Residence: Tipton



CAMPAIGN FINANCE NOTICE

A candidate's committee must file a pre-primary campaign finance report no later than **NOON, Monday, April 22, 2019**, with the appropriate county election board.

The candidate's committee must also file a pre-primary supplemental report no later than forty-eight (48) hours after the committee receives contributions from a person that totals \$1,000 or more during the period beginning **April 13, 2019 and ending May 5, 2019**, with the appropriate county election board. If no such contribution is received, the candidate's committee is not required to file a supplemental report.

A candidate's committee must file a pre-municipal election campaign finance report no later than **NOON, Friday, October 18, 2019**, with the appropriate county election board.

The candidate's committee must also file a pre-municipal election supplemental report no later than forty-eight (48) hours after the committee receives contributions from a person that total \$1,000 or more during the period beginning **October 12, 2019 and ending November 3, 2019**, with the appropriate county election board. If no such contribution is received, the candidate's committee is not required to file a supplemental report.

A person who fails to file a report with a county election board is subject to a civil penalty of \$50 for each day the report is late, with the afternoon of the final date for filing the report being calculated as the first day, for a maximum penalty of not more than \$1,000, plus any investigative costs incurred and documented by the county election board.



**CANDIDATE'S STATEMENT OF ORGANIZATION AND DESIGNATION OF PRINCIPAL COMMITTEE OR EXPLORATORY COMMITTEE**

**(CFA-1)**

State Form 4604 (R14 / 10-17)  
Indiana Election Division (IC 3-9-1-3; IC 3-9-1-4; IC 3-9-1-5)

**PLEASE TYPE OR PRINT LEGIBLY IN BLACK INK. SEE INSTRUCTIONS ON REVERSE SIDE.**

										FILE NUMBER
<b>1. IS THIS AN AMENDMENT?</b> <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <i>If Yes, please enter the file number in this box. →</i>										
<b>SECTION A. CANDIDATE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.</b>										
2. Last Name <b>GRECU</b>		First Name <b>MATTHEW</b>		Middle Name <b>G</b>		Nickname <b>MATT</b>		3. Type of Committee (Check one) <input checked="" type="checkbox"/> Candidate's Principal Committee <input type="checkbox"/> Exploratory Committee		
4. Mailing Address (number and street, city, state, and ZIP code) <b>3139 TIMBER VALLEY DRIVE</b>						5. FAX (Optional) ( )		6. E-mail Address (Optional) <b>mattgrecu@gmail.com</b>		
7. City <b>KOKOMO</b>		State <b>IN</b>	ZIP Code <b>46902</b>		8. County <b>HOWARD</b>		9. Telephone (Day) <b>(765) 4349896</b>		10. Telephone (Evening) <b>(765) 4349896</b>	
11. Party Affiliation <input type="checkbox"/> Democratic <input type="checkbox"/> Libertarian <input checked="" type="checkbox"/> Republican <input type="checkbox"/> Other _____						12. Office Sought (Include district number, if any. Not required for an exploratory committee.)				
<b>SECTION B. COMMITTEE INFORMATION: Fill in all applicable boxes as fully and accurately as possible.</b>										
13. Full Name of Committee (Do not abbreviate.) <input checked="" type="checkbox"/> Check if this is a new name. <b>FRIENDS FOR MATT GRECU</b>										
14. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. <b>3139 TIMBER VALLEY DRIVE</b>						15. FAX (Optional) ( )		16. E-mail Address (Optional) <b>mattgrecu@gmail.com</b>		
17. City <b>KOKOMO</b>		State <b>IN</b>	ZIP Code <b>46902</b>		18. County <b>HOWARD</b>		19. Telephone <b>(765) 4349896</b>		20. Committee Organization Date (mm/dd/yy) <b>2/1/2019</b>	
21. Chairperson's Full Name <input type="checkbox"/> Designate Candidate as Chairperson. <input checked="" type="checkbox"/> Check if this is a new chairperson. <b>JEFFREY A. STOUT</b>										
22. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. <b>230 E. MAIN ST.</b>						23. FAX (Optional) <b>(765) 4349896</b>		24. E-mail Address (Optional)		
25. City <b>RUSSIAVILLE</b>		State <b>IN</b>	ZIP Code <b>46902</b>		26. County <b>HOWARD</b>		27. Telephone (Day) <b>(765) 4341952</b>		28. Telephone (Evening) <b>(765) 4341952</b>	
29. Bank or Other Depositories (List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds.) <b>FIRST FARMER'S BANK &amp; TRUST, KOKOMO, IN</b>										
30. Exploratory Committee (Give brief statement explaining purpose of an exploratory committee only.)						31. Salaries and Reimbursements (Will the committee pay the candidate a salary or reimbursement for lost wages? If Yes, attach a copy of the contract.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No				
<b>SECTION C. APPOINTMENT OF TREASURER (IC 3-9-1-14)</b>										
32. I, as Chairperson of the foregoing committee, appoint the following person as Treasurer of the Committee.				Person Appointed Treasurer <b>PAUL G. WYMAN</b>			Signature of the Committee Chairperson 			
33. Treasurer's Full Name <input type="checkbox"/> Designate candidate as treasurer. <input checked="" type="checkbox"/> Check if this is a new treasurer. <b>PAUL G. WYMAN</b>										
34. Mailing Address (number and street, city, state, and ZIP code) <input type="checkbox"/> Check if this is a new address. <b>210 SANDY CT.</b>						35. FAX (Optional) ( )		36. E-mail Address (Optional)		
37. City <b>KOKOMO</b>		State <b>IN</b>	ZIP Code <b>46901</b>		38. County <b>HOWARD</b>		39. Telephone (Day) <b>(765) 4191021</b>		40. Telephone (Evening) <b>(765) 4191021</b>	
<b>SECTION D. ACCEPTANCE OF APPOINTMENT (IC 3-9-1-15)</b>										
41. I give notice that I accept the duties and responsibilities of Treasurer of this Committee. I am not the chairperson of a campaign finance committee (except as permitted for a candidate committee under IC 3-9-1-7).						Signature of Person Accepting Appointment				
<b>SECTION E. CERTIFICATION OF STATEMENT</b>										
We certify as the candidate and the duly appointed Chairperson of the Committee and that we have examined this statement. To the best of our knowledge and belief it is true, correct and complete.										
42. Typed or Printed Name of Chairperson <b>JEFFREY A. STOUT</b>			Signature of Chairperson 				Date (mm/dd/yy) <b>02/04/2019</b>			
43. Typed or Printed Name of Candidate <b>MATTHEW G. GRECU</b>			Signature of Candidate 				Date (mm/dd/yy) <b>02/04/2019</b>			
<b>Warning:</b> State law requires that any change in this information be reported <b>within ten (10) days</b> of the change (IC 3-9-1-10). A person who knowingly files a fraudulent report commits a Level 6 D felony (IC 3-14-1-13). A person who fails to file a complete or accurate report as required by the Indiana Campaign Finance Law commits a Class B misdemeanor (IC 3-14-1-14), and may be subject to civil penalties (IC 3-9-4-16, IC 3-9-4-17, and IC 3-9-4-18).										

FOR OFFICE USE ONLY  
**FILED**  
**FEB 05 2019**  
DEBBIE STEWART  
Clerk Howard Cir. Court



**STATEMENT OF ECONOMIC INTERESTS  
FOR LOCAL AND SCHOOL BOARD OFFICES**

**(CAN-12)**

State Form 55128 (11-12)  
Indiana Election Commission (IC 3-8-9)

**INSTRUCTIONS:** This statement must be filed with a candidate's: (1) declaration of candidacy for nomination at a primary or town party convention; (2) petition of nomination as a school board candidate; (3) petition of nomination as a minor party or independent candidate; (4) declaration of intent to be a write-in candidate; or (5) certificate of candidate selection to fill an early or late vacancy on a general or municipal election ballot. This statement must also be filed no later than noon 60 days after an individual assumes a vacant local office.

STATE OF INDIANA

COUNTY OF HOWARD

**INFORMATION FOR THE CALENDAR YEAR BEFORE THE DATE OF THIS FILING:**

20 19

**NOTE: Insert "Not Applicable" where appropriate.**

I, MATTHEW G. GRECU the undersigned, certify the following:  
Name of Candidate or Person Filling Vacant Office

(1) The elected office which I seek as a candidate, or to which I have been appointed to fill a vacancy is  
CITY COUNCIL AT LARGE. (Include district, if applicable.)

(2) The name of my spouse is DEBRA K. GRECU.

(3) The name of my employer and the nature of its business is  
SHIRLEY & STOUT FUNERAL HOMES & CREMATORY FUNERAL SERVICE.

(4) The name of the employer of my spouse and the nature of its business is  
REDEEMER LUTHERAN SCHOOL EDUCATION.

(5) If I own a sole proprietorship, the name of the sole proprietorship and the nature of its business is  
N/A.

(6) If I operate a professional practice, the name of the professional practice and the nature of its business is  
N/A.

(7) If I am a member of a partnership, the name of the partnership and the nature of its business is  
N/A.

(8) If my spouse is a member of a partnership, the name of the partnership and the nature of its business is  
N/A.

(9) If I am a member of a limited liability company, the name of the limited liability company and the nature of its business is  
N/A.

(10) If my spouse is a member of a limited liability company, the name of the limited liability company and the nature of its business is  
is N/A.

(11) If I am an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business is  
SHIRLEY & STOUT FUNERAL HOMES, INC. FUNERAL SERVICE.

(12) If my spouse is an officer or a director of a corporation (other than a church), the name of the corporation and the nature of its business is  
N/A.

**FILED**

COMPLETE THE AFFIRMATION ON REVERSE SIDE OF THIS FORM.

**FEB 05 2019**

**DEBBIE STEWART**  
Clerk Howard Cir. Court

I, the undersigned, affirm that the information set forth on this Statement of Economic Interests is true and complete.

Signed, this the 4 day of FEBRUARY, 2019.

[Handwritten Signature]  
Signature

MATTHEW G. GRECU  
Printed Name

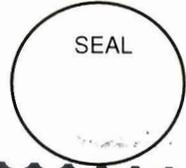
STATE OF INDIANA )  
COUNTY OF HOWARD )

Subscribed and affirmed to before me this 4 day of February, 2019

Kathryn E. Childers  
Notary Public or Other Official Administering Oath

My Commission expires (applies only to Notary Public): 8/17/2020

County of Residence: Tipton





**COUNTY ELECTION BOARD**  
**PRIMARY CANDIDACY FILING CONFIRMATION FOR 2019**  
State Form 46433 (R7 / 6-18)  
Indiana Election Division (IC 3-8-2-12)

(CAN-5)

**INSTRUCTIONS:** The Circuit Court Clerk or Lake County Election Director shall hand deliver or mail this form to an individual who files a declaration of candidacy for nomination at a primary election:

(1) at the mailing address listed in the declaration of candidacy; and

(2) **NO LATER THAN ONE DAY AFTER THE DECLARATION OF CANDIDACY IS FILED.**

The HOWARD Circuit Court Clerk (or in Lake County, the Election Director)

CERTIFIES THAT ON

FEBRUARY 5, 2019

**MATTHEW G GRECU**

**filed a declaration of candidacy for the office of**

**CITY COUNCIL AT LARGE**

for the REPUBLICAN Party Primary Election to be held on May 7, 2019.

\_\_\_\_\_  
HOWARD Circuit Court Clerk  
(or in Lake County, the Election Director)

**NOTICE**

By receiving a declaration of candidacy for filing, the circuit court clerk or Lake County Election Director is NOT determining that a declaration of candidacy is valid. Any question concerning the validation of a declaration of candidacy is referred to the appropriate county election board for determination. See Indiana Code 3-8-1-2.